

| POSITION            | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|------|
| FEE DETERMINATION   | SS       |        | 2/9  |
| O.I.P.E. CLASSIFIER | Sur      | 32     | 5/10 |
| FORMALITY REVIEW    | MB       |        | 5-10 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 1        | ✓    |
| 2        | ✓    |
| 3        | ✓    |
| 4        | ✓    |
| 5        | ✓    |
| 6        | ✓    |
| 7        | ✓    |
| 8        | ✓    |
| 9        | ✓    |
| 10       | ✓    |
| 11       | ✓    |
| 12       | ✓    |
| 13       | ✓    |
| 14       | ✓    |
| 15       | ✓    |
| 16       | ✓    |
| 17       | ✓    |
| 18       | ✓    |
| 19       | ✓    |
| 20       | ✓    |
| 21       | ✓    |
| 22       | ✓    |
| 23       | ✓    |
| 24       | ✓    |
| 25       | ✓    |
| 26       | ✓    |
| 27       | ✓    |
| 28       | ✓    |
| 29       | ✓    |
| 30       | ✓    |
| 31       | ✓    |
| 32       | ✓    |
| 33       | ✓    |
| 34       | ✓    |
| 35       | ✓    |
| 36       | ✓    |
| 37       | ✓    |
| 38       | ✓    |
| 39       | ✓    |
| 40       | ✓    |
| 41       | ✓    |
| 42       | ✓    |
| 43       | ✓    |
| 44       | ✓    |
| 45       | ✓    |
| 46       | ✓    |
| 47       | ✓    |
| 48       | ✓    |
| 49       | ✓    |
| 50       | ✓    |

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 51       | ✓    |
| 52       | ✓    |
| 53       | ✓    |
| 54       | ✓    |
| 55       | ✓    |
| 56       | ✓    |
| 57       | ✓    |
| 58       | ✓    |
| 59       | ✓    |
| 60       | ✓    |
| 61       | ✓    |
| 62       | ✓    |
| 63       | ✓    |
| 64       | ✓    |
| 65       | ✓    |
| 66       | ✓    |
| 67       | ✓    |
| 68       | ✓    |
| 69       | ✓    |
| 70       | ✓    |
| 71       | ✓    |
| 72       | ✓    |
| 73       | ✓    |
| 74       | ✓    |
| 75       | ✓    |
| 76       | ✓    |
| 77       | ✓    |
| 78       | ✓    |
| 79       | ✓    |
| 80       | ✓    |
| 81       | ✓    |
| 82       | ✓    |
| 83       | ✓    |
| 84       | ✓    |
| 85       | ✓    |
| 86       | ✓    |
| 87       | ✓    |
| 88       | ✓    |
| 89       | ✓    |
| 90       | ✓    |
| 91       | ✓    |
| 92       | ✓    |
| 93       | ✓    |
| 94       | ✓    |
| 95       | ✓    |
| 96       | ✓    |
| 97       | ✓    |
| 98       | ✓    |
| 99       | ✓    |
| 100      | ✓    |

| Claim    | Date |
|----------|------|
| Final    |      |
| Original |      |
| 101      | ✓    |
| 102      | ✓    |
| 103      | ✓    |
| 104      | ✓    |
| 105      | ✓    |
| 106      | ✓    |
| 107      | ✓    |
| 108      | ✓    |
| 109      | ✓    |
| 110      | ✓    |
| 111      | ✓    |
| 112      | ✓    |
| 113      | ✓    |
| 114      | ✓    |
| 115      | ✓    |
| 116      | ✓    |
| 117      | ✓    |
| 118      | ✓    |
| 119      | ✓    |
| 120      | ✓    |
| 121      | ✓    |
| 122      | ✓    |
| 123      | ✓    |
| 124      | ✓    |
| 125      | ✓    |
| 126      | ✓    |
| 127      | ✓    |
| 128      | ✓    |
| 129      | ✓    |
| 130      | ✓    |
| 131      | ✓    |
| 132      | ✓    |
| 133      | ✓    |
| 134      | ✓    |
| 135      | ✓    |
| 136      | ✓    |
| 137      | ✓    |
| 138      | ✓    |
| 139      | ✓    |
| 140      | ✓    |
| 141      | ✓    |
| 142      | ✓    |
| 143      | ✓    |
| 144      | ✓    |
| 145      | ✓    |
| 146      | ✓    |
| 147      | ✓    |
| 148      | ✓    |
| 149      | ✓    |
| 150      | ✓    |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)